BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE OR		OTHER THAN SMALL ENTITY	
FOR		NUMBE	R FILED	NUMBER E	XTRA	RATE	FEE	5	RATE	FEE
BASIC FEE							345.00	OR		690.00
TOTAL CLAIMS		0	7 minus 2	0= - 4		X\$ 9=		OR	X\$18=	346
IND	EPENDENT CL	AIMS	minus 3	3= 1: 1:4		X39=		OR	X78=	IM2
MULTIPLE DEPENDENT CLAIM PRESENT								OR	+260≔	***/
* f	the difference i	in column 1 is	ess than ze	+130≈ TOTAL		OR	TOTAL	794		
	Cl	AIMS AS A	MENDED	(Column 2)	(Column 3)	SMALL	NTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	=	X39≃		OR	X78=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT CLAIM		+130=		OR	+260=	
						TOTAL			TOTAL	
		(Calumn 1)		(Column 2)	(Column 3)	ADDIT. FEE			ADDIT. FEE	
		(Column 1) CLAIMS	784 2 14 K. C	HIGHEST	(Column 3)		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE.	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	=	X39=		OR	X78=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM		.100			+260=	
						+130=		OR	TOTAL	
						ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* ,	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	=	X39=	<u></u>	OR	X78=	
	FIRST PRESE			7.4	1 = ==					
	If the entry in column	ma 1 in loss than t	ha antro in calu	mn 2, write "0" in co	duma 3	+130=		OR	+260=	
**	If the "Highest Nur "If the "Highest Nu	mber Previously Pa mber Previously P	aid For" IN THI aid For" IN THI	S SPACE is less that S SPACE is less that S SPACE is less that I independent) is the	an 20, enter "20." an 3, enter "3."	TOTAL ADDIT. FEE found in the ap	propriate bo	OR x in co	TOTAL ADDIT, FEE olumn 1.	

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION	NUMBER:											
Total Fee Calculation												
	Fee Code	Total # Claims	Number Extra X	Fee	Fee	= Total						
	Sm./Lg.			Sm. Entity	Lg. Entity	((, 0						
Basic Filing Fee	201/101	1.1	17			- U90						
Total Claims >20	203/103	<u>U</u> / .20 =	4/x			. 840						
Independent Claims >3	202/102	17.	14 x			= 1001.						
Mult. Dep Claim Present	204/104		1			<u> </u>						
Surcharge	205/105	•				- 130						
English Translation	139											
TOTAL FEE CALCULA	ATION					3018						
Fees due upon filing t	the application:											
Total Filing Fees Due		3	018									
Less Filing Fees Subr	nitted - \$											
BALANCE DUE	= \$	308	5/ 5									
Office of Initial Paten	t Examination											
		1· i;	gure 7									

FORM OIPE-RAM-01 (Rev. 12/97)